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## Effectiveness of Comprehensive Sex Education Training Program Among Adolescent for Safe Sexual Health Practices

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### Article Info

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### ABSTRACT:

Comprehensive Sexuality Education is a sex education instruction method based on a curriculum that aims to give students the holistic knowledge, attitudes, skills, and values to make healthy and informed choices in their sexual lives. This study aims to evaluate the Effectiveness of Comprehensive Sex Education Training Program on Knowledge, Attitude and Belief Regarding Safe Sexual Health Practices Among Higher Secondary Students in The Selected Schools of Vadodara. A pre-experimental (one group pre-test and post-test), evaluative research approach was used to achieve the objectives of the study on 202 students of class eleventh using a purposive sampling method. Results regarding knowledge showed that mean post-test knowledge score was 24.1 (3.11) higher than mean pre-test knowledge score 14.80 (2.87) with mean difference of 9.38 and obtained (t value=33.66, df=201, p=0.001) was found statistically highly significant at p<0.05 level. While assessing attitude in post-test 183(90.6%) had favourable attitude and 19(9.4%) had unfavourable attitude and same while checking belief in post-test 168(83.2%) had rational belief and 34(16.8%) had irrational belief regarding safe sexual health practices of higher secondary students. Correlation was used for identifying that there is no relationship between knowledge, attitude and belief with socio demographic variable towards regarding safe sexual health practices of higher secondary students .

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## 1. Introduction

Schools taught us everything we need to know, for our future bright to being a responsible citizen as well as a human being, it right away starts from the school. But when it comes to sex education, why do we lag behind? Actually, we live in a country where condom ads are banned instead of decreasing the level of vulgarity in advertisements. We feel so doubtful in talking sexual matters, the precautions and complications. Sex education is, therefore, the need of the hour. Sexual matters are often inadequately explained to persons needing advice, whatever their age, because of religious beliefs or taboo.<sup>1</sup> As the data mentioned by WHO, world more than half population come under age 20, so there is need of comprehensive sex education to be the part of school – curriculum as it provides gender biased, age – appropriate necessary toolkit of knowledge, attitude and skills.<sup>2</sup> Nowadays the easy access to mobile phones and internet has become an popular source of sex education for adolescent across the world and became a misleading and unauthorized source of information. ( reported by Betty Koshy in her article in year 2022) .<sup>3</sup> Adolescents are often at a higher risk for acquiring STIs because they are unable to conceptualize actions and their consequences thus many are unable to negotiate safer sex. It helps one to make right choices about one's body. The revised Guidance presents sexuality with a positive approach, recognizing that Comprehensive sex education goes beyond educating about reproduction, risks and disease. It endorse the sexuality education within a framework of human rights and gender equality. It and reflects the contribution of sexuality education to the realization of several internationally agreed commitments in relation to sexual and reproductive health, as well as the achievement of the goals in the 2030 Agenda in relation to health.<sup>3</sup> It will help them to prevent various disease condition's such as HIV, AIDS, and other sexually transmitted diseases. It will certainly reduce teenage pregnancy, abortion, early childhood marriage and sexual abuse violence and let adolescence to adopt safe sexual practices, use of contraception and healthy parenthood.<sup>4</sup> This study aims to Evaluate the Effectiveness of Comprehensive Sex Education Training Program on Knowledge, Attitude and Belief Regarding Safe Sexual Health Practices Among Higher Secondary Students.

## 2. Methods

The study was conducted on higher secondary students from selected school of Vadodara. The sample size for the study was estimated as 202. Using the convenience sampling method and based on the inclusion and exclusion criteria, 202 students were recruited for the study.

### Inclusion Criteria

1. All Girls and Boys of higher secondary classes.
2. Subjects who is available at the time of data collection.
3. Those parents who will give consent

### Exclusion Criteria

1. Subjects who are not willing to participate in the study
- All the students are of class eleventh were willing to participate in the study.

Table 1.5 Day instructional training program

DAY	TITLE	TOPIC	TEACHING METHODOLOGY WITH AV-AIDS USED

1	Human Sexual Anatomy	Anatomy & Physiology of Male and Female Reproductive System Pubertal & Adolescent Sexual Development	Methodology: Lecture AV AIDS: PPT
2	Emotional Relations, Reproductive Rights & Personal Safety	<ul style="list-style-type: none"> <li>▪ Relationship &amp; Intimacy</li> <li>▪ Human Rights</li> <li>▪ Women's &amp; Men's Rights</li> <li>▪ Gender Equality</li> <li>▪ LGBTQ Rights</li> <li>▪ Interpersonal Violence</li> </ul>	Methodology: Inquiry Based Learning AV AIDS:PPT
3	Identity	<ul style="list-style-type: none"> <li>▪ Gender Identity &amp; Expressions</li> <li>▪ Sexual Orientation &amp; Identity</li> </ul>	Methodology: Small Group Instruction AV AIDS Used: PPT
4	Sexually Transmitted Diseases & It's Prevention	Sexually Transmitted Infection- Causes, Prevention and Management	Methodology: Lecture AV AIDS Used: PPT
5	Contraception & Abstinence	<ul style="list-style-type: none"> <li>▪ Abstinence</li> <li>▪ Mechanical Barriers</li> <li>▪ Emergency Postcoital Contraception</li> <li>▪ Benefits of Delaying Sexual Activity</li> </ul>	Methodology: Inductive learning AV AIDS Used :PPT

A 5- day intensive training program was prepared, on each Day one topic was discussed in which several sub-topic were covered to ensure total coverage of comprehensive training program which will ensure the safe sexual health practices among higher secondary students. For this study, data were collected from the students to assess knowledge, attitude and

belief regarding Comprehensive sex education training program as a learning strategy. After extensive review of literature and suggestions from experts following tools were developed for attainment of objectives and to test the hypothesis. Data were collected from the classroom. The schedule for data collection was prepared and was followed strictly to avoid mishandling of data.

Section		f		Percentage (%)	
		Pre- test	Post- test	Pre- test	Post- test
Knowledge	Poor	14	0	6.9	0
	Average	186	42	92.1	20.8
	Good	2	160	1	79.2
Attitude	Unfavorable	27	19	13.4	9.4
	Favorable	175	183	86.6	90.6
Belief	Irrational	108	34	53.5	16.8
	Rational	94	168	46.5	83.2

### Instruments

#### Knowledge questionnaire

Comprises 30 multiple choice-based questions on various topics such as Anatomy and Physiology, Emotional Relation, Reproductive Rights and Personal safety, Identity, Sexually Transmitted and its prevention Contraception and abstinence, Misconception related to sex education. From each section of the module knowledge questionnaire were made focusing the need of the student and depending on it weightage of the question were decided. This tool was used to assess the student's knowledge regarding Comprehensive sex education. Each correct answer was given a score of one and unanswered or wrong answer was given a score of zero. The highest score is 30 and the lowest score is 0,

#### Attitude Scale

For checking attitude in students regarding Comprehensive sex education in student I developed rating scale which was five-point rating scale and also contain positive and negative question.

#### Belief Scale

For checking Belief in students regarding Comprehensive sex education I constructed four-point rating scale to check believe in student. This contain positive and negative question.

### 3. Result

#### Frequency and Percentage Distribution of Demographic Variables of higher secondary students.

In the present study data revealed that respondents lie in age between 14 to 18 years in which majority lie in the 16-17 yrs 174(f) 86.1% in which males are 99(f) 49% and female are 103(f) 51% and the majority of father are post-graduated 183(f) 90.6% and most of them are married 189(f) 93.6% and had their own business 93(f) 46% and majority belong to moderate income group 123(f) 61% and live in nuclear family 140(f) 69.3% and had mostly one sibling 95(f) 47% and most of students had never attended any type of this type of sex education previously.

#### Findings related to Comparison of Pre-Test and Post-Test Frequency and Percentage Table1; Pre-Test and Post-Test Frequency and Percentage Comparison Chart

Table; Pretest majority 186(92.1%) had average knowledge, 14(6.9%) had poor knowledge and 2(1%) whereas in post-test 160(79.2%) had good knowledge and 42(20.8%) had average knowledge, in pre-test attitude 175(86.6%) had favorable attitude and 27(13.4%) had

unfavorable attitude whereas in post-test attitude 183(90.6%) had favorable attitude and 19(9.4%) had unfavorable attitude and in belief 108(53.5%) had irrational belief and 94(46.5%) had rational belief in post-test 168(83.2%) had rational belief and 34(16.8%) had irrational belief regarding safe sexual health practices of higher secondary students.

Table 2: Effectiveness of comprehensive sex education training program on knowledge, attitude and belief regarding safe sexual health practices of higher secondary students.  
n=202

Effectiveness	Pre-test Mean (SD)	Post-test Mean (SD)	Mean D	t value	df	P value
Knowledge	14.80 (2.87)	24.1 (3.11)	9.38	33.66	201	0.001*
Attitude	69.09 (7.66)	80.84 (8.82)	11.75	14.31	201	0.001*
Belief	49.90 (5.47)	70.17 (10.704)	20.27	26.66	201	0.001*

**\*p<0.05 level of significance**

Table 2 depicts the effectiveness of comprehensive sex education training program on knowledge, attitude and belief regarding safe sexual health practices of higher secondary students which was tested by using paired t test.

Results regarding knowledge showed that mean post-test knowledge score was 24.1 (3.11) higher than mean pre-test knowledge score 14.80 (2.87) with mean difference of 9.38 and obtained (t value=33.66, df=201, p=0.001) was found statistically highly significant at p<0.05 level. Results regarding attitude showed that mean post-test attitude score was 80.84 (8.82) higher than mean pre-test attitude score 69.09 (7.66) with mean difference of 11.75 and obtained (t value=14.32, df=202, p=0.001) was found statistically highly significant at p<0.05 level. Results regarding belief showed that mean post-test belief score was 70.17 (10.70) higher than mean pre-test belief score 49.90 (5.47) with mean difference of 20.27 and obtained (t value=26.66, df=202, p=0.001) was found statistically highly significant at p<0.05 level.

Findings conclude that comprehensive sex education training program was effective in improving the knowledge, attitude and belief regarding safe sexual health practices of higher secondary students.

#### **Finding related to association between pre-test attitude regarding safe sexual health practices of higher secondary students with their selected demographic variables**

Table depicts the association between pre-test attitude regarding safe sexual health practices of higher secondary students with their selected demographic variables which was tested by using chi-square test. Result revealed that marital status of parents, parents economic status, No of siblings, type of family were statistically significant at p<0.05 but other variables such as age, gender, educational status of father, employment status of father and previously attended any sex educational program were not found any significant association at p<0.05 level with pre-test attitude regarding safe sexual health practices of higher secondary students.

#### 4. Discussion

In this study results regarding knowledge showed that mean post-test knowledge score was 24.1 (3.11) higher than mean pre-test knowledge score 14.80 (2.87) with mean difference of 9.38 and obtained ( $t$  value=33.66,  $df$ =201,  $p$ =0.001) was found statistically highly significant at  $p < 0.05$  level.

Results regarding attitude showed that mean post-test attitude score was 80.84 (8.82) higher than mean pre-test attitude score 69.09 (7.66) with mean difference of 11.75 and obtained ( $t$  value=14.32,  $df$ =202,  $p$ =0.001) was found statistically highly significant at  $p < 0.05$  level.

Results regarding belief showed that mean post-test belief score was 70.17 (10.70) higher than mean pre-test belief score 49.90 (5.47) with mean difference of 20.27 and obtained ( $t$  value=26.66,  $df$ =202,  $p$ =0.001) was found statistically highly significant at  $p < 0.05$  level.

Similar study done by **T.JEYARANI(2010)** to Evaluate the Effectiveness of Structured Teaching Programme regarding Sex Education among Adolescent Girls in Vivekananda Higher Secondary school at Appadurai, Erode District In experimental group knowledge on anatomy and physiology of reproductive system mean score was 8.16 & standard deviation was 1.34 and in control group mean score was 4.96 & standard deviation was 1.06 with the effectiveness of 35.56 and  $t=9.347, p=0.001$  and it is statistically significant In experimental group knowledge on puberty and` and adolescent mean score was 4.12 & standard deviation was 1.20 and in control group mean score was 6.48 & standard deviation was 0.82 with the effectiveness of 33.71 and  $t=8.946, p=0.00$  and it is statistically significant In experimental group knowledge on human sexuality mean score was 2.00& standard deviation was 0.58 and in control group mean score was 2.76 & standard deviation was 0.44 with the effectiveness of 25.33 and  $t=4.879, p=0.00$  and it is statistically significant In experimental group knowledge on STDs mean score was 9.04 & standard deviation was 1.57 and in control group mean score was 5.92 & standard deviation was 1.08 with the effectiveness of 28.36 and  $t=8.203, p=0.001$  and it is statistically significant In experimental group knowledge on AIDS mean score was 7.96 & standard deviation was 1.10 and in control group mean score was 5.16 & standard deviation was 0.94 with the effectiveness of 28.00 and  $t=9.669, p=0.001$  and it is statistically significant It shows that the  $p$  value for the entire dimension and over all knowledge is less than 0.01. Since the  $p$  value is less the difference is highly significant. Hence the Structured Teaching Programme on Sex Education is more effective.<sup>5</sup>

#### 5. Conclusion:

From the above findings the study provides the effectiveness of comprehensive sex education programs in improving knowledge, attitude, and belief regarding safe sexual health practices among higher secondary students. It also highlights the importance of such programs in promoting informed decision-making and positive attitudes towards safe sexual health.

#### Recommendations:

On the basis of study findings, the following recommendations have laid

- A similar audit study would be replicated in different settings.
- A similar study can be conducted in rural adolescent girls and boys.
- A comparative study can be done between rural High school and urban high school adolescent boys and girls.
- A similar study could be done to assess the knowledge, attitude and belief of the teacher.

- A study could be done on the parents to assess the belief and attitude regarding giving comprehensive sex education in school.

### **Ethical Clearance**

Ethical clearance taken from ethical committee and the approval no is PUIECHR/PISMR/00/081734/6110

### **Conflict of Interest**

There is no conflict of interest.

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